

## Further Education/Apprenticeship Application Form 2019/2020

<b>For office use only</b>	Student ID:
----------------------------	-------------

Please complete all sections of this application form for all full time courses at all centres. For help completing this form please contact Student Records (contact details below). PLEASE COMPLETE IN BLACK INK AND BLOCK CAPITALS. PLEASE ENSURE YOU PROVIDE ACCURATE CONTACT DETAILS FOR CORRESPONDENCE SUCH AS TEXT ALERTS.

### 1. PERSONAL DETAILS

Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mx <input type="checkbox"/> Other <input type="checkbox"/> .....	Address:
Surname:	
Forename(s):	
Date of Birth:	
Telephone (home):	Postcode:
E-mail:	Mobile:
	National Insurance Number

### 2. EMERGENCY CONTACT DETAILS (THIS MUST BE AN ADULT) *The person must know they are your emergency contact*

Full name:	Address (if different from home address):
Relationship to you:	
Home Tel No.(inc. STD code):	
Work Tel No.(inc. STD code):	Postcode:
	Mobile:

If you are aged between 16-18 or have an EHCP, by providing these details, you also consent to your Emergency Contact being contacted about any interviews at the College, in the event we are unable to contact you directly on the number you have provided.

### 3. CENTRE / COURSE APPLYING FOR (ALL APPLICANTS TO COMPLETE)

Applications for all centres are processed at our main York or Newton Rigg centres. When your application form is complete you need to return it to the relevant address. Please tick which centre you wish to study at:

York <input type="checkbox"/>	Saltaire <input type="checkbox"/>	Wakefield <input type="checkbox"/>	<b>Newton Rigg</b> <input type="checkbox"/>	Middlesbrough <input type="checkbox"/>	Newcastle <input type="checkbox"/>
For courses at these locations please send applications to: Askham Bryan College, Askham Bryan, York, YO23 3FR Tel: 01904 772211 Email: Enquiries@askham-bryan.ac.uk			For courses at these locations please send applications to: Newton Rigg College, Penrith, CA11 0AH Tel: 01768 893651 Email: Enquiries@newtonrigg.ac.uk		

Course Name (please tick if you would like Full Time or Apprenticeship)	Level	Full Time	Apprenticeship
<b>First Choice</b>		<input type="checkbox"/>	<input type="checkbox"/>
<b>Second Choice</b>		<input type="checkbox"/>	<input type="checkbox"/>

### 4. STUDENT SUPPORT (ALL APPLICANTS TO COMPLETE)

We want to make sure that you succeed right from the start.

Please let us know if you consider yourself to have a disability, learning difficulty or any special educational needs (SEN). We ask for this information so that we can offer support and so we can plan any adjustments well in advance. Please tick which applies to you.

I have a learning difficulty and/or disability?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have specific educational needs (SEN)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have an Educational Health and Care Plan (EHCP)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you feel you need any support before or for when you come for your interview, please tell us what would help you:

### 5. EDUCATION / TRAINING / EMPLOYMENT DETAILS

Are you currently:  in education  in training  in employment  unemployed  
 If in education/training or employment please provide details below: **By providing these details, you are giving your consent for them to be contacted prior to your interview at the College for a reference.**

Name of School/Training Provider	Employer's Company name
Name of Head of Year/Mentor: Address	Name of Employer: Address
Postcode	Postcode

## 6. QUALIFICATIONS AND REFERENCES (ALL APPLICANTS TO COMPLETE)

Please make sure that you have double checked that you meet the minimum entry criteria for the course(s) you are applying for. All applications are shortlisted based on the information you provide in this section.

If you are currently awaiting the results of a qualification please provide the predicted grade.

If you have already achieved a result then please provide the grade and year achieved (*use additional sheet if necessary*).

Level/award (e.g. GCSE/BTEC)	Subject	Predicted grade	Achieved grade	Year achieved

All applicants must provide names of two referees. IF YOU DO NOT WANT TO USE THE NAMED CONTACT IN SECTION 5, PLEASE COMPLETE THE BOXES BELOW. References are not accepted from close relatives (mother, father, uncle, aunt, brother or sister).

If you are currently in education, training or employment then please use their details for a reference. Please provide the full name and address in the referee box below. Failure to supply this may delay your application/interview.

**REFEREE** (Full name and address needed)

**By providing these details, you are giving your consent for them to be contacted prior to your interview at the College.**

Name:	Name
Position	Position
Address: (Including School or Company name):	Address: (Including School or Company name):
Postcode:	Postcode
Email:	Email

Alternatively, if you are at Askham Bryan College please provide the name of your **Tutor** and **course** below.

Tutor Name:
Course:

## 7. CRIMINAL CONVICTIONS (ALL APPLICANTS TO COMPLETE)

Askham Bryan College welcomes applicants from ex-offenders and considers them on their merits. However, you are required to tell us about any convictions which are not spent under the Rehabilitation of Offenders Act (1974)

Do you have any unspent criminal conviction(s) and/or prosecutions pending?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If 'Yes', we will contact you for further information, prior to arranging an interview.		
<b>Please note: you do not need to tick the yes box if your criminal conviction is spent as defined by the Rehabilitation of Offenders Act 1974.</b>		

### Data Protection Statement

I agree to the College processing my personal and sensitive data to assess my application and shortlist interviewees. I also agree to the College sharing my details with relevant organisations to support my application. The College retains data for 2 months for unsuccessful applicants, 10 years for successful ones. The College holds personal data in accordance with the College data retention policy which is available at <https://www.askham-bryan.ac.uk/the-college/college-policies>. All data will remain at all times within the UK and European Economic Area ("EEA"). Applicants can withdraw consent at any time (though this may have consequences for your application). Concerns can be reported to the College Data Protection Officer ([judith.clapham@askham-bryan.ac.uk](mailto:judith.clapham@askham-bryan.ac.uk)) and complaints made to the ICO <https://ico.org.uk/concerns/>.

## 8. SIGNATURE (ALL APPLICANTS TO COMPLETE)

I agree that the information provided on this form is accurate and true. <b>I have read and agree with the statements above.</b>	
Signature of applicant:	Date:

We would like to keep in touch with you regarding College information and other College events.

- Yes - please use my contact details to keep me informed about College information and events  
 No - I do not wish to be contacted about College information and events.